PART B - FEE(S) TRANSMITTAL

Cemplete and send t	historm, together wit	n applicable is	ee(s), to: <u>ivia</u>	Commissioner f			
JUN 2 8 2	005 뇌	•	JUN 3 0 2	Commissioner f P.O. Box 1450 Alexandria, Vir	ginia 22313-1450 EXP	RESS MATI TARET	
	/#	=======================================	or Fa	x (703) 746-4000	EV4	.66258481IIS	
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	590 03/31/2005						
KOPPEL, JACO 555 ST. CHARLE SUITE 107 THOUSAND OAK	·	EYBL		I hereby certify that to States Postal Service addressed to the Matransmitted to the US	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
07/01/2005 FFANAIA3 00	0000131 10696336			E	Eleanor Nakada (Depositor's name)		
01 FC:2501 700.00 OP				<u> </u>	G-28-15 (Signature		
02 FC:1504 03 FC:8001	300.00 DP 30.00 DP				X Vahu	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/696,336	19/28/2003		Patrick C	ase	101-27-018	8094	
ELECTRICAL ENCLOSUI	RE USING A PLUG AND S	EAL			BETWEEN AN INTERIOR		
APPLN, TYPE	SMALL ENTITY	ISSUE FE	ie	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional				\$300	\$1000	06/30/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	_		
ESTRADA, ANGEL R		2831		174-050000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED O. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Koppel, Jacobs, Patrick & Heybl 2 3				
PLEASE NOTE: Unless		low, no assignee of	data will appear	on the patent. If an assig	nee is identified below, the	document has been filed for	
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Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the pate	nt): 🗖 Individual 🖾 C	Corporation or other private gr	roup entity Government	
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_ ~ .	(from status indicated above MALL ENTITY status. See	,	☐ b. Applicant	is no longer claiming SMA	ALL ENTITY status. See 37 (CFR 1.27(g)(2).	
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Authorized Signature	mK!	Dun		Date	6/28/05		
Typed or printed name	James K. I	awson		Registration	n No. 41,701		
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313	inia 22313-1450. DO NOT	11. The information 122 and 37 CFR 1 O. Time will vary could be sent to the SEND FEES OR C	n is required to control in its required to control in its required to the control in its requirement in its	obtain or retain a benefit by tion is estimated to take 12 the individual case. Any c ion Officer, U.S. Patent and ORMS TO THIS ADDRES	the public which is to file (ar minutes to complete, includi comments on the amount of t d Trademark Office, U.S. Dep S. SEND TO: Commissioner	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

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